

2016-2017

**ISSAQUAH YOUTH ADVISORY BOARD
CONFIDENTIAL REFERENCE FORM**



Please have a teacher, coach, or community leader who knows you well (who is not related to you) complete this form.

Deadline: Friday, May 6, 2016

THANK YOU FOR YOUR TIME!

Slide completed form into an envelope and sign your signature across the seal.

Mail to: Issaquah Parks & Recreation, Attn: Cathy Jones, P.O. Box 1307,

Issaquah, WA 98027 OR Fax to: 425-837-3309

OR Email answers to cathyj@issaquahwa.gov

Name of applicant: _____ School: _____

Your name: _____

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

Please evaluate the applicant by marking the appropriate box.

	Never	Sometimes	Often	Always	I don't know
• Demonstrates age-appropriate maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Demonstrates follow-through	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is dependable and reliable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Possesses a strong record of attendance and being on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is accepting of diverse populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Willingly takes the role of leader or follower as needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Possesses a positive attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Demonstrates self-motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is creative and innovative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is your overall recommendation?

- ☐ I recommend the applicant without reservation as an excellent candidate for the Issaquah Youth Advisory Board.
- ☐ I recommend the applicant as a good candidate for the Issaquah Youth Advisory Board.
- ☐ I have some reservations, but believe the applicant has a chance for success.
- ☐ I do not recommend the applicant for the Issaquah Youth Advisory Board.

Signature _____ **Phone #** _____